



Division of Aging Services

State Review Guide

for

Senior Center Requirements HCBS 206

PSA/County: _____ **Site:** _____

Reviewer: _____ **Date:** _____

Revised December 20, 2004

Review Guide Purpose and Scope:

This guide is designed to assist the Area Agencies on Aging in measuring the compliance and performance of subcontractors for Senior Center services.

An Area Agency providing Senior Center service directly will be held responsible to the same rules, regulations and compliance requirements.

Abbreviations and Acronyms (Peculiar to this guide/Service/Program):

AAA	Area Agency on Aging
ADL	Activities of Daily Living
AIMS	Aging Information Management System
DON-R	Determination of Need - Revised
DAS	Division of Aging Services
DHR	Department of Human Resources
FN	Footnote
IADL	Instrumental Activities of Daily Living
NSI	Nutrition Screening Initiative
UCM	Uniform Cost Methodology

SECTION 206 - SENIOR CENTER REQUIREMENTS

Items to be Completed Prior to On-Site Review

It will be necessary for the monitor to complete the following tasks and review guide items before making the on-site visit. Items are identified with an asterisk () in the review guide.*

Item #	Review Guide #	Action Required	Purpose	Completed
1.	All Items	Review Previous Monitoring Report	To become familiar with past performance of the provider and/or site.	Yes _____ No _____
2.	1.	Review Contract and/or AIMS Contract Documents and any applicable subcontracts	To become familiar with services to be provided and any applicable subcontract(s).	Yes _____ No _____
3.	3. and 15.a.	Review AIMS Report <u>HCBS – Validation – Add/Edit Meal Log</u>	To determine average number of center participants.	Yes _____ No _____
4.	27.	Review provider file for <u>Program Evaluation Plan</u> .	To determine if the provider's annual evaluation plan has been submitted to the AAA.	Yes _____ No _____
5.	<i>In order to complete some of the items in this review guide, it may be necessary for the monitor to measure the dimensions of rooms and/or ramps and test the temperature of the hot water in the bathrooms. It is suggested the monitor be equipped with a measuring tape and an appropriate thermometer.</i>			

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Item #	Section Cited	Compliance Section 206 Senior Center Requirements	Yes/ No/ N/A Comments
2.	206.4.c	<p><u>Facility Requirements</u> The senior center staff has identified space affording privacy and confidentiality where individual counseling may be provided.</p> <p>_____ In a separate, Private Room</p> <p>_____ In a shared place/room, as long as other occupants vacate the room</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
*3. (Review AIMS Report)	206.4.d	<p><u>Facility Requirements</u> Based on the square footage requirements required by Section 206.4.d, does the center have adequate dining and activities space? Note: this means square footage of space available for occupancy by staff and participants to be considered, excluding any storage or toilet rooms.</p> <p><i>Monitor – review <u>HCBS – Validation – Add/Edit Meal Logs</u> for months prior to monitoring date to determine the average number of participants and divide the square footage for the dining and/or activities area(s) by the number of average participants.</i></p> <p>_____SF - Center has separate dining area from activity area (12 square feet per participant)</p> <p>_____SF - Dining and activities areas are combined (12 + 12 square feet per participant)</p> <p>_____SF divided by _____ (Average Number of Participants) = _____SF/Participant</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
4.	<p>206.4.e</p> <p>206.4.e.1</p> <p>206.4.e.2</p> <p>206.4.e.3</p>	<p><u>Outdoor space</u></p> <p>The outdoor area is connected to and directly accessible from the center. Yes _____ No _____ N/A _____</p> <p>Exterior activity areas are protected and shaded. Yes _____ No _____ N/A _____</p> <p>Exterior activity areas are furnished with safe, clean furniture and equipment. Yes _____ No _____ N/A _____</p> <p><i>Monitor – observe the outdoor areas to determine the above.</i></p>	<p>Comments:</p>

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5.	206.4.f.2, 206.4.f.3 and 206.5.3.a.2. A	<p><u>Existing Buildings</u></p> <p>Senior Center is a permanent construction with working electrical, plumbing and mechanical systems.</p> <p><i>Monitor – ask to view any inspection certificates or engineering reports that the center may have on file; note type of inspection and date of last inspection.</i></p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
6.	206.5 206.5.1 206.5.1.a.1 206.5.1.a.2 206.5.1.a.4 206.5.1.a.5 206.5.1.a.6 206.5.1.a.7 and 206.5.1.a.8	<p><u>Center Environment</u></p> <p><u>Sanitation</u></p> <p>Individuals who prepare and/or serve meals are wearing clean clothing and exhibit and maintain hygienic practices and conditions (i.e. food handling and personal). Yes_____ No_____ N/A_____</p> <p>Staff supervises participants who assist in preparing or serving food. (Note: Staff can also be volunteers.) Yes_____ No_____ N/A_____</p> <p>Single-service utensils are disposed of properly. Yes_____ No_____ N/A_____</p> <p>If reusable/durable tableware, plates, cups, and/or glasses are used at this center, there is a working dishwasher to accommodate cleaning and sanitizing of these items. Yes_____ No_____ N/A_____</p> <p>Food preparation areas are separate from the dining area. Yes_____ No_____ N/A_____</p> <p>If the center prepares food on-site, separate hand washing fixtures (sink, hot and cold water, soap and individual towels) are provided. Yes_____ No_____ N/A_____</p>	<p>Comments:</p>

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7.	206.5.1.b 206.5.1.b.1 206.5.1.b.2 (Revised 8/2002) 206.5.1.b.3	<p><u>Food Storage</u></p> <p>Food and drink items are stored up off of the floor. Yes_____ No_____ N/A_____</p> <p>All perishable foods are covered and refrigerated at or below 41 degrees Fahrenheit (5 degrees Celsius) and stored in a sanitary manner. Yes_____ No_____ N/A_____</p> <p>Freezing units are maintained at or below 0 degrees Fahrenheit (-18 degrees Celsius). Foods stored in the freezer are wrapped in appropriate materials or containers; storage dates and contents are identified. Yes_____ No_____ N/A_____</p> <p><i>Monitor – observe stored food and drink items for compliance.</i></p>	Comments:
8.	206.5.1.c 206.5.1.c.1; 206.5.1.c.2 and 206.5.1.c.3	<p><u>General Conditions</u></p> <p>All outside containers have tight fitting lids in the closed position and are maintained in a clean and serviceable condition. Garbage is removed from the site on a regular basis.</p> <p><i>Monitor – observe waste, trash, and garbage containers for compliance.</i></p> <p>Comments:</p>	Yes _____ No _____ N/A _____ Comments:
9.	206.5.1.c 206.5.1.c.4 206.5.1.c.5	<p><u>General Conditions</u></p> <p>Center floors are clean, coverings are appropriate for the intended use of the each room or activity area, are slip-proof, and secured to prevent falls. Yes_____ No_____ N/A_____</p> <p>Walls and ceilings are in good condition, painted and clean. Yes_____ No_____ N/A_____</p> <p><i>Monitor – observe floors, walls, and ceilings for compliance.</i></p>	Comments:

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10.	206.5.1.d	<u>Toilet Rooms</u> <i>Monitor – observe toilet rooms for the following:</i>	Comments:
	206.5.1.d.1	If center is newly constructed, it has separate restroom facilities for men and women. Yes_____ No_____ N/A_____	
	206.5.1.d.2	The center has at least one working toilet and one working lavatory for every 15 participants. Yes_____ No_____ N/A_____	
	206.5.1.d.3 and 206.5.1.d.5	The center has only one toilet (unisex) and it complies with accessibility requirements, including grab bars. Yes_____ No_____ N/A_____	
	206.5.1.d.4	Multiple toilet rooms are compartmentalized. Yes_____ No_____ N/A_____	
	206.5.1.d.5	At least one of the compartments in each men’s and women’s toilet room has grab bars. Yes_____ No_____ N/A_____	
	206.5.1.d.6	Hot and cold water, soap, warm air dryers or a sanitary source of paper towels are available at the lavatories/sinks. Yes_____ No_____ N/A_____	
	206.5.1.d.6	Hot water does not exceed 120 degrees Fahrenheit. Yes_____ No_____ N/A_____	
	206.5.1.d.7	Exposed lavatory pipes are covered with an appropriate insulating material. Yes_____ No_____ N/A_____	
	206.5.1.e	All toilet rooms are mechanically ventilated and odor free. Yes_____ No_____ N/A_____	
11.	206.5.1.f.1 and 206.5.1.f.2	<u>Pest Control</u> The center has a pest control program. <i>Monitor – ask for confirmation of routine pest control work performed.</i> Comments:	Yes _____ No _____ N/A _____ Comments:

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12.	206.5.2.	<u>Safety and Accessibility</u>	Comments:
		<i>Monitor – document compliance/non-compliance for the following items through observation or written form.</i>	
	206.5.2.a	Center has a standard telephone (not a pay phone) immediately accessible to all occupants. Yes_____ No_____ N/A_____	
	206.5.2.a	Center has a list of local emergency telephone numbers posted near the phone. Yes_____ No_____ N/A_____	
	206.5.2.b	Stairs, walks, ramps, and porches are maintained in a safe condition. Yes_____ No_____ N/A_____	
	206.5.2.b.1	Stairway handrails are constructed of substantial materials and properly attached. Yes_____ No_____ N/A_____	
	206.5.2.b.2	Elevators are in a safe operating condition and inspected annually. Yes_____ No_____ N/A_____	
	206.5.2.b.3	Ramps are constructed at proper slope. (1 foot rise per 12 linear feet) Yes_____ No_____ N/A_____	
	206.5.2.b.4	Ramps, walks, and steps are constructed of a slip-resistive material, smooth, and uniform. Yes _____ No _____ N/A _____	
	206.5.2.c	Center has animals which are tolerant of people and documentation of immunizations. Yes_____ No_____ N/A_____	
	206.5.2.d	Center participants have access to safe drinking water at all times. Yes_____ No_____ N/A_____	
	206.5.2.e; 206.6.h.1; 206.18.a and	Center has a written emergency response plan with procedures to respond to fires, tornadoes and other weather emergencies, missing participants, injuries, utility outages, etc. This plan addresses evacuating staff and/or participants with hearing, visual, and/or gait/mobility	

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12. <i>Cont'd</i>	206.18.b	impairments and includes notification of the emergency to the AAA in a timely manner. Yes_____ No_____ N/A_____	
	206.5.2.e.1	Center has a legible evacuation plan/floor plan drawing posted throughout the site. Yes_____ No_____ N/A_____	
	206.5.2.e.2	All staff and volunteers have been trained on duties during an emergency. Yes_____ No_____ N/A_____	
	206.5.2.e.3	Center has documentation for practice of quarterly fire drills, to include time it takes to vacate the building. (Note: Suggest provider contact local Fire Marshall or fire department representative for an evaluation of the center to provide input as to a reasonable length of time for participants, guests, staff, volunteers, etc. to completely vacate the building safely.) Yes_____ No_____ N/A_____	
		How long does it take? _____	
		Is the time it takes to vacate the center safely within a reasonable length of the time? Yes_____ No_____ N/A_____	
	206.5.2.e.3	Center has documentation for practice of annual tornado drills, to include time it takes to safely complete the drill. Yes_____ No_____ N/A_____	
		How long does it take? _____	
		Is the time it takes to complete the drill safely reasonable? Yes_____ No_____ N/A_____	
	206.5.2.f and also note Appendix B	The center has a sited parking lot with universal or the appropriate number of accessible spaces in accordance with the ADA. Yes_____ No_____ N/A_____	
	206.5.2.g	Center has passenger loading zones adjacent to loading area and connected to the building by an accessible route or level path. Yes_____ No_____ N/A_____	

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13.	206.5.3	<u>Fire Protection and Person Safety</u> <i>Monitor – document compliance/non-compliance for the following items through observation or written form.</i>	Comments:
	206.5.3.a.1	Center has documentation of annual fire safety inspections. Yes_____ No_____ N/A_____	
		Date of last inspection: _____	
	206.5.3.a.2. C	All extension cords in excess of 6 feet are secured to the floor and not placed under rugs and/or carpets. Yes_____ No_____ N/A_____	
	206.5.3.a.3. C	Center has gas heating system checked annually prior to operating by qualified individual. Yes_____ No_____ N/A_____	
	206.5.3.b.1	Center has proper number of 2A, 10-B-C fire extinguishers per 1,500 square feet of space. Yes_____ No_____ N/A_____	
	206.5.3.b.2	Center has a fire extinguisher located in the kitchen. Yes_____ No_____ N/A_____	
	206.5.3.b.3	Each fire extinguisher is in operable condition, inspected once a year by a qualified person, and labeled indicating condition and date of last test date. Yes_____ No_____ N/A_____	
	206.5.3.b.4	Center staff have been instructed in the use of the fire extinguisher(s). Yes_____ No_____ N/A_____	
	206.5.3.c.1	Center participants have appropriate storage space for personal items. Yes_____ No_____ N/A_____	
	206.5.3.c.2	Center does not store flammable substances in the building housing the participants. Yes_____ No_____ N/A_____	
	206.5.3.c.3	Center is free of accumulation of extraneous materials	

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13. <i>Cont'd</i>	206.5.3.d	and refuse. Yes_____ No_____ N/A_____	
		Smoking is prohibited inside the center facility during the hours of operation of senior programs and in interior areas designed for activities funded by the Division of Aging Services. Yes_____ No_____ N/A_____	
	206.5.3.e	Center has working smoke detectors in all activity rooms, food preparation areas, and hallways. Yes_____ No_____ N/A_____	
	206.5.3.e	Center staff tests such smoke detectors monthly and has written documentation. Yes_____ No_____ N/A_____	
	206.5.3.f	Center has basic first aid supplies available, in date, clearly marked, and accessible. Yes_____ No_____ N/A_____	
14.	206.5.4	<u>Interior and Furnishings</u> <i>Monitor – Observe and document compliance/non-compliance for the following items.</i>	Comments:
	206.5.4.a.1	Furniture and equipment is arranged so that it does not obstruct exits or create barriers to movement inside of the center. Yes_____ No_____ N/A_____	
	206.5.4.a.2	Center has enough seating/chairs and table space sufficient to seat all participants for dining at one time. Yes_____ No_____ N/A_____	
	206.5.4.b	The interior temperature of the center is maintained at a setting which is healthy, safe, and comfortable for the participants. Yes_____ No_____ N/A_____	
	206.5.4.c. 1 thru 206.5.4.c.7	The lighting level in the center is adequate and consistent throughout, to include transition areas, hallways, toilet rooms, etc. Yes_____ No_____ N/A_____	

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15.	206.6	<u>Center Operations</u> <i>Monitor – document compliance/non-compliance for the following items through observation or written form.</i>	Comments:
* (Review AIMS Report)	206.6.a	Center serves an average of at least 20 participants per day. Yes_____ No_____ N/A_____ Average number of participants per day: _____	
	206.6.b	Center serves hot or other appropriate meals at least once a day for a minimum of 250 service days a year. Yes_____ No_____ N/A_____ 	
	206.6.c	The center has made provisions to provide meals needed by participants on the days the center is closed for holidays. Yes_____ No_____ N/A_____ 	
	206.6.d	The center is open to participants for a minimum of four (4) hours a day with a responsible person present at all times while participants are present, including during meal service. Yes_____ No_____ N/A_____ Center Hours of operation: _____ a.m. to _____ a.m. / p.m. = _____ Hours	
16.	206.6.e	<u>First Aid, CPR, and Heimlich Maneuver Certification</u> The center's full-time staff have and maintain certification in basic first aid, cardio-pulmonary resuscitation (CPR) and are able to perform the Heimlich Maneuver. The center has documentation of each staff person's certification for the monitor to review. Yes_____ No_____ N/A_____ The center has at least one person trained in first aid, CPR, and the Heimlich Maneuver present in the Facility at all timeswhile participants are present. Yes_____ No_____ N/A_____	Comments:

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17.	206.6.f	The center has the following posted in visible locations and in legible, large-print formats: <i>Monitor – ask center staff to identify the location of each of the following items:</i>	Comments:
	206.6.f.1	Certified menu for current week Yes_____ No_____ N/A_____	
	206.6.f.1	Meal Costs Information Yes_____ No_____ N/A_____	
	206.6.f.2	Voluntary Contributions Policies and Procedures Yes_____ No_____ N/A_____	
	206.6.f.2	Notice of the center’s acceptance of Food Stamps Yes_____ No_____ N/A_____	
	206.6.f.2	Cost share requirements Yes_____ No_____ N/A_____	
	206.6.f.3; 206.13.c and 206.13.d	Activities Calendar Yes_____ No_____ N/A_____	
	206.6.f.4	Notices of accessibility and non-discrimination Policies Yes_____ No_____ N/A_____	
	206.6.f.4	Participant Complaint Procedures Yes_____ No_____ N/A_____	
	206.6.f.5	Emergency Evacuation Plan Yes_____ No_____ N/A_____	
	206.6.f.6	Visual Nutrition Education Materials Yes_____ No_____ N/A_____	

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18.	206.6.g 206.6.g.1 and 206.6.g.2	<p><u>Governance</u></p> <p>The center is a free-standing organization. Yes _____ / N/A _____</p> <p>OR</p> <p>The center is part of an umbrella organization. Yes _____ / NA _____</p> <p>Written basic operational policies and procedures have been developed and have been made available to paid and volunteer staff, participants, funders, and other interested individuals upon request.</p> <p><i>Monitor – review operational policies and procedures.</i></p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
19.	206.7	<p><u>Political Activity</u></p> <p>The center is not used for political campaigning. Yes _____ No _____ N/A _____</p> <p>Political materials are not posted or distributed in the center facilities. Yes _____ No _____ N/A _____</p> <p>Comments:</p>	<p>Comments:</p>
20.	206.9 206.9.a 206.9.b	<p><u>Insurance</u></p> <p>The entity or organization operating this center for senior center activities has, at a minimum, general liability coverage for staff, volunteers and participants. Yes _____ No _____ N/A _____</p> <p>Workers compensation benefits are provided for paid staff. Yes _____ No _____ N/A _____</p>	<p>Comments:</p>

Item #	Section Cited	Compliance Section 206 Senior Center Requirements	Yes/ No/ N/A Comments
20. <i>Cont'd</i>	206.9.c 206.9.d	<p>Appropriate and sufficient insurance coverage against damages and loss is carried on the building/center and the contents. Yes_____ No_____ N/A_____</p> <p><i>Monitor – obtain copy of the certificate of insurance for file for items a, b, and c above.</i></p> <p>The provider agency self-insures and has provided written documentation to monitor that the entity has sufficient funds set aside to cover such insurance needs as described in Section 206.9. (Monitor - obtain a copy for file.) Yes_____ No_____ N/A_____</p>	
21.	206.10 206.10.e and 206.10.f	<p><u>Voluntary Contributions and Service Cost Share</u></p> <p><u>Assessing Activities Fees</u> The provider has provided the monitor with a copy of the written policies and procedures for assessing a fee for activities to cover the cost of supplies, materials, or the time of a professional instructor.</p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
22.	206.13 206.13.a, 206.13.b, 206.13.c, 206.13.d, and 206.6.f.3 206.13	<p><u>Programming</u></p> <p>The center provides a minimum of one hour of planned activities per day, in addition to nutrition education provided. The activities provided are not for the purpose of selling any goods or services to the participants.</p> <p><i>Monitor – review documentation (i.e. method, frequency participants are asked, etc.) of input and feedback obtained from participants regarding their interests for programming and activities.</i></p> <p>Comments:</p> <p><i>Monitor – review activities calendar for compliance.</i></p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>

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23.	206.14	<p><u>Staffing and Supervision</u></p> <p>NOTE: Items 206.14.a, b, c, and e are addressed in the review guide for Section 304.6.g also. If Sections 304 and 206 are being administered simultaneously, it is not necessary to document this requirement in both review guides.</p> <p>(1)The provider agency has identified an individual (full-time, paid staff person) who is responsible for the overall day-to-day management of nutrition services and compliance with performance requirements, standards and procedures, and has established a formal system of supervision for both paid and volunteer staff.</p> <p>Name: _____</p> <p>Title: _____</p> <p>(2) This person, and any other employee(s) responsible for food service management, shall complete appropriate coursework in food protection, etc. in accordance with these sections.</p> <p>Has the appropriate staff completed the coursework for certification? Yes _____ No _____</p> <p>If “yes”, please indicate certification program(s): Comments:</p> <p>If “no”, when will training occur? Comments:</p> <p>(3)The center has adequate and qualified staff to implement the activities and services planned to meet the center and participant objectives.</p> <p><i>Monitor – discuss with the site representative the adequacy or inadequacy of staff at the center to implement activities and services for the seniors.</i></p> <p>Comments:</p>	<p>(1) Yes _____ No _____ N/A _____</p> <p>Comments:</p> <p>(2) Yes _____ No _____ N/A _____</p> <p>Comments:</p> <p>(3) Yes _____ No _____ N/A _____</p> <p>Comments:</p>
	206.14.d.	<p><i>Monitor – discuss with the site representative the adequacy or inadequacy of staff at the center to implement activities and services for the seniors.</i></p> <p>Comments:</p>	<p>(3) Yes _____ No _____ N/A _____</p> <p>Comments:</p>

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24.	206.15.a thru 206.15.d	<p><u>Attendance and Discharge Policies</u></p> <p>Each senior center, or organization providing senior center services at multiple sites, shall develop and submit for review and approval by the AAA, policies which address conditions for attendance and participation in activities.</p> <p><i>Monitor – review forms and/or policies for (a) discharge planning, (b) staff protocols for dealing with behavioral problems, (c) provision of advance written notice, and (d) referral to appropriate sources.</i></p> <p>Comments:</p> <p><i>Monitor - inquire as to how and when clients are informed of these policies.</i></p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
25.	206.16	<p><u>Reporting of incidents or accidents</u></p> <p>There are policies and procedures in place, including a standard of promptness, to report an incident or accident involving staff, volunteers, and/or participants to the parent organization and/or to the AAA directly.</p> <p><i>Monitor - review policies and procedures.</i></p> <p>Comments:</p> <p><i>Monitor – review documentation of an incident or accident occurred. Were the policies and procedures followed?</i></p> <p style="text-align: center;">Yes _____ No _____</p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>

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26.	206.17	<p><u>Mandatory reporting of suspected abuse, neglect, or exploitation</u></p> <p>Staff is trained in the responsibility of being mandatory reporters of suspected situations of abuse, neglect, exploitation, or the likelihood of serious physical harm involving older persons and reporting such incidents to the proper authorities.</p> <p>How, when and by whom are center staff trained to recognize and report abuse, neglect, exploitation, etc.?</p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>
*27.	206.21.a thru c. (Revised 8/2002)	<p><u>Program evaluation</u></p> <p>Each center with an individual contract, or center management provider, shall prepare and submit to the AAA annually, no later than the end of the first quarter of the new fiscal year (September 30), a written report which summarizes the evaluation findings, improvements goals, and implementation plan for each site.</p> <p><i>Monitor – If the annual plan has not been submitted to the AAA, seek resolution of this requirement with the responsible person.</i></p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>

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28.	206.22	<p><u>Fiscal management</u></p> <p>The center has procedures for the appropriate handling and accounting for all sources of program and project income, including voluntary contributions, fees, and income generated through fund raising events.</p> <p><i>Monitor – review the procedures and documentation for handling and accounting for program and project income.</i></p> <p>Comments:</p>	<p>Yes _____ No _____ N/A _____</p> <p>Comments:</p>